

Note: All information provided on this form is subject to the Texas Public Information Act and shall be released to the media and public if requested.

WATER USE VARIANCE APPLICATION

Applicant(s) Address:			
Applicant (s) Name:		Phone:	
What is the purpose of the wat	er use?		
From what Specific Provision(s	s) of the Drought Contingency	Plan are you requesting relief?	
☐ Days of watering?	☐ Hours of watering?	☐ Dust Control during Construction?	
☐ Washing of vehicles?	☐ Use of a fire hydrant?	☐ Water for a fountain / pond?	
☐ Golf course irrigation?	☐ Water for swimming, wa	ding or spa pools?	
☐ Serving unrequested w	ater in restaurants? Other		
How will the selected Provision	n(s) above adversely affect you	u?	
Describe the specific relief you	are requesting?		
How long do you want the vari	ance? No. of Days?	(30 days maximum)	
Starting Date:	Ending Date	x:	
What alternative ways do you	propose to take that will meet	the requirements of the Plan?	
\\/\bat ather particular information	an ann you add to justify the in	augnes of this variance?	
What other pertinent information	on can you add to justily the is	suance of this variance?	
Signature:		Date:	
City Use: Variance approv	/ed? Yes No		
Reason:			
		Date:	
By:		Date	

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